U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U -

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

Name and address of person filing.			4. Name, file number, and address of labor organization.			
Name Steven	K Ury		Name	Service Empl	oyees Inter	national Union
			Labor	Organization File No	umber 000-13	7
					taaaaaaaa	
P.O. Box, Bldg., Room No., if any Suite 1050			P.O. I	Box, Building and Ro	om Number, if an	у
Street 3055 Wilshire Blvd.			Stree	1313 L Stree	t NW	
Dity Los Angeles			City	City		
zos migozos	200 100 200 200 200 200 200 200 200 200			Washington		
State California		ZIP Code + 4 90010-1164	State	District of	Columbia	ZIP Code + 4 20005
 Position in labor organization. 	Assistan	t General Counsel				
1.0 Supplemental and Advances	or the best t				A PETROL DE BILLIE	Table 201 of the last of all our
		past fiscal year, you or your spo	ouse or mi	or child directly or i	ndirectly had any	of the fellowing interests
cittei appropriate data belo	w II, during the	(except as specified in the excl	usions set	forth in the instruction	ndirectly had any o	of the following interests
Held an interset in engag	and in transport					
nonetary value from an emi	plover whose	ons (including loans) with, or employees your organizat	derived i	ncome or other eco	nomic benefit of	naant
		,	ion repre	serits or is actively	seeking to repr	esent.
				ture of Interest, Trans		
6. Name and address of Employ						
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B. Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	rwise dealing with the business ively seeking to represent, or directly to, or otherwise				
8. Name and address of Business (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any:	9. Business deals with: a. Labor Organization b. Trust c. Employer 11.a. Nature of such dealing.				
P.O. Box, Bldg., Room No., if any					
Street	11.b. Approximate dollar value of such dealing.	[**************************************			
City	Nature of interest held or income received.				
State ZIP Code + 4					
	12.b. Amount.				
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of money	er parts A and B above)				
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.				
Name Geffner & Bush	On or about April 27 or 28, 2004, Geffner & Bush paid for my dinner at a restaurant in New York City. I do not know the name of the restaurant or				
Trade Name, if any:	the amount of payment.				
P.O. Box, Bldg., Room No., if any Suite 1100					
Street 3500 W. Olive Avenue					
City Burbank					
State California ZIP Code + 4 91505					
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	Unknown			